4130000 83071

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



100249320621

07/01/13--01046--008 **25.00

13 JUL -1 AHII: 56

SECRETARY OF STATE
DIVISION OF CORPORATIONS

JUL 2 2013

T. HAMPTON

TO: Registration Section
Division of Corporations

SUBJECT: Ascension Cycle Works
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard
Rage

1085 Orange Wharf Court

Firm/Company

Winter Garden FL

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rick Page at (407) 509.9169

Name of Person at (407) Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR . BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

on Cycle Works LLC
Winten Garden, FL 3478)
SAME
L130000 83071
4. Document number
he records of the Florida Dept. of State:
Richard Page
1085 ORANGE WHARF COURT - WINTER GARDEN, FL 34787 US
V Registered Office address:
Lora Page
1085 ORANGE WHARF COURT WINTER GARDEN, FL 34787 USFL
aws of the State of Florida, it is hereby orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of se provided in the articles of organization or the provided in the articles of organization or the provided in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office of has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00